:: NATIONAL RESPONSE CENTER :: :: MOBILE REPORT (PDF) ::

The PDF Report should not be submitted to the NRC via fax or mail. They were created for use in Training and/or Response Plans, or as a guide when contacting the NRC.

Please file reports via our toll-free number (800-424-8802) or by submitting an ONLINE REPORT.

Fields displayed in RED are mandatory entries. Please fill out the form as completely as possible.				
Is this a DRILL Report ? YES NO	E-Mail Address:			
REPORTING PARTY	SUSPECTED RESPONSIBLE PARTY			
Phone 1: Type:	Last Name:			
Last Name:	First Name:			
First Name:	Phone 1: Type:			
Phone 2: Type:	Phone 2: Type:			
Phone 3: Type:	Phone 3: Type:			
Company:	Company:			
Org Type:	Org Type:			
Address:	Address:			
City:	City:			
State:	State:			
ZIP:	ZIP:			
Are you calling on behalf of responsible party:	Yes No			
Are you or your company responsible for Material released:	Yes No			
INCIDEN	IT DESCRIPTION			
Description of Incident:				

Incident Date:	Time:	Occurred/Discovered/Plan	ned:		
Type of Incident: MOBILE		Incident Cause:			
	INCIDE	NT LOCATION			
Location Description:					
Address Location:		State:			
		County:			
		ZIP:			
Nearest City: Di	istance from Neares	st City: Units:			
Direction: Range:	Secti	on: Township:			
Latitude: Degrees: Minutes:	Seconds:	Quadrant:			
Longitude: Degrees: Minutes:	Seconds:	Quadrant:			
	MOBILE IN	ICIDENT DETAILS			
Road Mile Marker: Air Ba	ng Deployed: Y	es No Unknown			
Transit Bus Involved: Yes No	Unknown Leng	th of Service Disruption:	Uni	ts:	
VEHICLE #1					
Vehicle Type:		Identification Number:			
Fuel Capacity:		Hazmat Carrier: Yes	No	Unknown	
Carrier Licensed: Yes No Un	nknown Non-Co	mpliance with Hazmat Regs:	Yes	No	Unknown
VEHICLE #2					
Vehicle Type:		Identification Number:			
Fuel Capacity:		Hazmat Carrier: Yes	No	Unknown	
Carrier Licensed: Yes No Un		mpliance with Hazmat Regs:	Yes	No	Unknown
	TRAILER/T	TANKER DETAILS			
	TA	ANKER #1			

Identification Number:		Cargo Capacity:	Units:
Actual Cargo:	Units:		
		TANKER #2	
Identification Number:	_	Cargo Capacity:	Units:
		our go outputting.	
Actual Cargo:	Units:		
		MATERIAL INVOLVED	
MATERIAL #1			
Material:		CHRIS Code:	CAS Code:
Amount Released:	Units:	Amount in Water	: Units:
MATERIAL #2			
Material:		CHRIS Code:	CAS Code:
Amount Released:	Units:	Amount in Water	: Units:
MATERIAL #3			
Material:		CHRIS Code:	CAS Code:
Amount Released:	Units:	Amount in Water	: Units:
MATERIAL #4			
Material:		CHRIS Code:	CAS Code:
Amount Released:	Units:	Amount in Water	: Units:
MATERIAL #5			
Material:		CHRIS Code:	CAS Code:
Amount Released:	Units:	Amount in Water	r: Units:
	MATE	RIAL IN WATER INFORMA	TION
Body of Water Affected:		Offshore: Yes No	River Mile Marker:
Tributary of:		Water Supply Contaminated:	Yes No Unknown
Water Temperature:	Units:		
Wave Condition:	Spe	ed: Units:	Direction:
		SHEEN INFORMATION	
Sheen Length:	Units:	Sheen Width:	Units:

Color:			Direction of	Movement:
Odor Description:				
			IMPACT I	NFORMATION
Medium Affected:		Det	ailed Medium	Information:
Fire:	Yes	No	Unknown	Fire Extinguished: Yes No Unknown
Injuries:	Yes	No	Unknown	Number of Injuries: Number to Hospital: Rail Employee Injuries:
				Rail Passenger Injuries:
Fatalities:	Yes	No	Unknown	Number of Fatalities: Employee Fatalities: Passenger Fatalities: Vehicle Fatalities:
Evacuations:	Yes	No	Unknown	Number Evacuated: Radius/Area in Miles: Who was Evacuated:
Damages:	Yes	No	Unknown	Damage in Dollars:
Road Closed:	Yes	No	Unknown	Road: Major Artery: Yes No Hours Closed: Direction of Closure:
Track Closed:	Yes	No	Unknown	Track:
Passengers Transferred:	Yes	No	Unknown	Hours Closed: Direction of Closure:
Air Corridor Closed:	Yes	No	Unknown	Air Corridor: Hours Closed:
Waterway Closed:	Yes	No	Unknown	Waterway: Hours Closed:
Environmental Impact:	Yes Unknown	No		Type of Impact:
				Media Interest:
			WEATHER	INFORMATION
Weather Conditions:			Air Tem	perature:

Wind Speed:	Unit:		Wind Direction:	
		REMEDIA	AL ACTION INFORMA	ATION
Remedial Action Ta	ken:			
Release Secured:	Yes N	o Unknown	Release Duration:	Unit:
Rate of Release:	U	Init:	Per:	
		ADDITION	AL AGENCY INFORM	MATION
Federal Agency Not	ified:			
State/Local Agency	Notified:			
State/Local Agency	On-Scene:			
State Agency's Rep	ort Number:			
		ADDIT	ΓΙΟΝΑL INFORMATIO	ON

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